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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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| DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) | | Attorney Docket Number | | 24528-71531US | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--------------------------|--|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--|------------------|--------------------------|--|-----|----|--|--|--|--------------------------|--------------------------|--------------------------|--|--|--|--------------------------|--------------------------|--------------------------|--|--|--|--------------------------|--------------------------|--------------------------|
| | | First Named Inventor | | Will SHATFORD | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required) | | COMPLETE IF KNOWN | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Application Number | | To Be Assigned | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Filing Date | | Herewith | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Group Art Unit | | TBA | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Examiner Name | | TBA | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>As a below named inventor, I hereby declare that:</p> <p>My residence, mailing address, and citizenship are as stated below next to my name.</p> <p>I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:</p> <p style="text-align: center;">Biometric Based Authentication System with Random Generated PIN</p> <p>the specification of which</p> <p><input checked="" type="checkbox"/> is attached hereto</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> was filed on * as United States Application Number * or PCT International Application Number _____ and was amended on (MM/DD/YYYY) _____ (if applicable).</p> <p>I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designed at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Prior Foreign Application Number(s)</th> <th rowspan="2">Country</th> <th rowspan="2">Foreign Filing Date (MM/DD/YYYY)</th> <th rowspan="2">Priority Claimed</th> <th colspan="2">Certified Copy Attached?</th> </tr> <tr> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p><input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.</p> | | | | | | Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Claimed | Certified Copy Attached? | | YES | NO | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Claimed | Certified Copy Attached? | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | YES | NO | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Application Number(s)</th> <th>Filing Date (MM/DD/YYYY)</th> <th rowspan="2"> <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached her to. </th> </tr> </thead> <tbody> <tr> <td>60/393,614</td> <td>July 3, 2002</td> <td></td> </tr> </tbody> </table> | | | | | | Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached her to. | 60/393,614 | July 3, 2002 | | | | | | | | | | | | | | | | | | | | | |
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DECLARATION – Utility or Design Patent ApplicationDirect all correspondence to: ☐ Customer Number or ☒ Correspondence address belowName Evelyn H. McConathyAddress Dilworth Paxson LLPAddress 3200 Mellon Bank Center, 1735 Market StreetCity PhiladelphiaState PennsylvaniaZip 19103Country USTelephone 215.575.7000Fax 215.575.7200**POWER OF ATTORNEY**

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

**Evelyn H. McConathy, Reg. No. 35,279; Darryl W. Shorter, Reg. No. 47,942; and
Lisa Burgin Conte, Reg. No. 52,470**[X] I hereby appoint the practitioner(s) associated with Customer Number 27730 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

[] Attached, as part of this Declaration and Power of Attorney, is the authorization of the above-named practitioner(s) to accept and follow instructions from my representative(s).

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))

Family Name or Surname

Will

SHATFORD

Inventor's Signature Will Shatford

Date

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Family Name or Surname

Inventor's Signature

Date

Residence/City:

State

Country

Citizenship

Mailing Address:

Mailing Address:

City:

State

Zip

Country

☐ Additional inventors are being named on the one (1) supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto